### ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

FEB 2 3 2007

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(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
Automobile Liability Private     Passenger Commercial		
Automobile Physical Damage     Private Passenger Commercial		
3. Liability Other Than Auto	\$128,177	+15.5%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of Insurance		
Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specify: N	
boes ming only apply to certain territory	(territories) of certain classes: if so, specify.	
	s rates of an advisory organization, specify orga	nization): <u>Personal Umbrella</u>
Liability Rate and Rule Revision, 15.5 pe	ercent increase.	
*Adjusted to reflect all prior rate change **Change in Company's premium level v	s. which will result from application of new rates.	
	Allied Property and	Casualty Insurance Company
		me of Company
	Laurie B. Chann	ian, Manager, State Filings
		Official Tina

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

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FEB 2 3 2007

Change in Company's premium or rate le	vel produced by rate revision effective	April 1, 2007
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent Change (+ or -)**
Automobile Liability Private		
Passenger Commercial _		
2. Automobile Physical Damage		
Private Passenger Commercial	\$555,016	+14.9%
3. Liability Other Than Auto		+ (4.970
<ol> <li>Burglary and Theft</li> <li>Glass</li> </ol>		
6. Fidelity	W-10	
7. Surety		
8. Boiler and Machinery		
Q Eiro		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of insurance		
Does filing only apply to certain territory (t	erritories) or certain classes? If so, specify:	No
book ming only apply to contain termony (		
Brief description of filing. (If filing follows r Liability Rate and Rule Revision, 14.9 per	ates of an advisory organization, specify or	ganization): <u>Personal Umbrella</u>
Elability Trate and Trate Revision, 1470 per	0011 Morodoo.	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level wh	nich will result from application of new rates	
	ΔΜCΩ	Insurance Company
		Name of Company
		•
	Laurie B. Char	oman, Manager, State Filings
		Official - Title

### ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/2007 (3) (2) (1)Percent **Annual Premium** Change (+ or -)\*\* Volume (Illinois)\* Coverage Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial -0.98% 1,054,234 3. Liability Other Than Auto Burglary and Theft 4. 5. Glass 6. Fidelity 7. Surety 8. **Boiler and Machinery** 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies only to policies that fall within specific Technology Program Class Codes as indicated on the filed Rate Page. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): CNA is filing a deviation to be applied to the General Liability Loss Costs for Technology Program policies. \*Adjusted to reflect all prior rate changes. \*\*Change in Company's premium level which will result from application of new rates. American Casualty Company of Reading, PA Name of Company J. Spencer Wideman - Actuarial Consultant

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Official - Title

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Form (RF-3)	SUM	MARY SHEET	RECEIVED
Change i revision e	n Company's premium effective06/0	or rate level produced by rate 1/07	FEB - 5 2007  IDFPR (MPC)  DIVISION OF INSURANCE  SPRINGFIELD
(1) _Coverage		(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
Automobile Liability     Private Passenger     Commercial     Automobile Physical Dai     Private Passenger     Commercial	mage		(
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other  Line of Insurance  Does filing only apply to certain		\$452,426	-9.9%
Adoption of ISU's Revised Ger	ing follows rates of an a neral Liability Increased 2006-IALL1	advisory organization, specify or I Limits Factors.	rganization):
* Adjusted to reflect all prior r ** Change in Company's prem	ate changes. ium level which will res	sult from application of new rates	s.
AME	RICAN H <u>OME ASSURA</u> Na	NCE COMPANY me of Company	
	Dorothy L. To	odd, Senior Filing Analyst cial - Title	

Form (RF-3)	SUMMAR	Y SHEET	RECEIVED	
	ge in Company's premium or ra on effective06/01/07	te level produced by rate	FEB - 5 2007  IDFPH (MPC)  DIVISION OF INSURANCE  SPRINGFIELD	
(1)		(2) Statewide Annual	(3) Percent Change	
_ Coverag	ge	Premium Volume *	(+ or -)**	
Automobile Liability     Private Passenger     Commercial     Automobile Physical	Damage			
Private Passenger Commercial 3. Liability Other Than A 4. Burglary and Theft 5. Glass		\$2,478	-9.9%	
<ul><li>6. Fidelity</li><li>7. Surety</li><li>8. Boiler and Machinery</li><li>9. Fire</li></ul>	·			
<ul><li>10. Extended Coverage</li><li>11. Inland Marine</li><li>12. Homeowners</li><li>13. Commercial Multi-Pe</li></ul>				
14. Crop Hail 15. Other Line of Insura				
Does filing only apply to certain territory(s) or certain class(s)? If so, specify:				
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO's Revised General Liability Increased Limits Factors.  Designation Number: GL-2006-IALL1				
* Adjusted to reflect all prior rate changes.  ** Change in Company's premium level which will result from application of new rates.				
AMERICAN INTERNATIONAL SOUTH INSURANCE COMPANY  Name of Company			ANY	

Dorothy L. Todd, Senior Filing Analyst
Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		07/15/2007	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private     Passenger Commercial			
Automobile Physical Damage     Private Passenger Commercia	I		
3. Liability Other Than Auto	\$44,582,674.	-1.31%	
Burglary and Theft			
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
<ul><li>12. Homeowners</li><li>13. Commercial Multi-Peril</li></ul>			
14. Crop Hail			
15. Other			
Line of Insurance			
Does filing only apply to certain territory	y (territories) or certain classes? If so, specif	y: Filing applies to all territories	
and classes.	· · · · · · · · · · · · · · · · · · ·		
	rs rates of an advisory organization, specify are also revising our increased limits factors.		
*Adjusted to reflect all prior rate change **Change in Company's premium level	which will result from application of new rate		
	ine Cinc	cinnati Insurance Company Name of Company	
	Connie Peter	tonjes-Senior Filings Specialist Official - Title	
		Omdai - Tiue	

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

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SPRINGFIELD, ILLINOIS

Form	(RF-(	3
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#### SUMMARY SHEET

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DFPH (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Change in Company's premium or rate level produced by rate revision effective 06/01/07

	(1) Coverage	(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$108,765	-9.9%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		· · · · · · · · · · · · · · · · · · ·
Doe	s filing only apply to certain territory(s) or certain clas	ss(s)? If so, specify:	
Ado	description of filing. (If filing follows rates of an advertion of ISO's Revised General Liability Increased Li		ganization):
Jesi	gnation Number: GL-2006-IALL1	, <del>-</del> <del>-</del>	

COMMERCE & INDUSTRY INSURANCE COMPANY

Name of Company

Dorothy L. Todd, Senior Filing Analyst

Official - Title

<sup>\*</sup> Adjusted to reflect all prior rate changes.

<sup>\*\*</sup> Change in Company's premium level which will result from application of new rates.

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial  2. Automobile Physical Damage		
<ol> <li>Automobile Physical Damage Private Passenger Commerc</li> </ol>	nial	
3. Liability Other Than Auto	1,905,536	-0.85%
4. Burglary and Theft	1,000,000	
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
<ol><li>Extended Coverage</li></ol>		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territ	ory (territories) or certain classes? If so, specify:	
This filing applies only to policies that fall with	in specific Technology Program Class Codes as indicated on	the filed Rate Page.
This hing applies only to ponote that the		
Brief description of filing. (If filing folk	ows rates of an advisory organization, specify organization	anization):
CNA is filing a deviation to be applied to the C	Seneral Liability Loss Costs for Technology Program policies.	
*Adjusted to reflect all prior rate char	iges.	
**Change in Company's premium lev	el which will result from application of new rates.	
	Continental Casualty Compa	inv
		ame of Company
		• •
	J. Spencer Wideman - Actua	arial Consultant
		Official - Title

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## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	<u>Volume (Illinois)*</u>	Change (+ or -)**
Automobile Liability Private		
Passenger Commercial		
. Automobile Physical Damage		
Private Passenger Commercial		
. Liability Other Than Auto	1,650,455	1.26%
. Burglary and Theft		
. Glass		
. Fidelity		
′. Surety	44.44.44	
Boiler and Machinery		
. Fire		
Extended Coverage		
Inland Marine		
2. Homeowners		
Commercial Multi-Peril	<u> </u>	
4. Crop Hail		<del> </del>
5. Other		
Line of Insurance		
Does filing only apply to certain territory (terr	torios) or certain classes? If so, specifi	r
his filing applies only to policies that fall within specific	Tachnology Program Class Codes as indicated	on the filed Rate Page
his filing applies only to policies that fall within specific	Peciniology Program Class Codes as indicated	on the med rate rage.
Brief description of filing. (If filing follows rate	s of an advisory organization, specify o	organization):
CNA is filing a deviation to be applied to the General Li	ability Loss Costs for Technology Program polici	es.
INA IS filling a deviation to be applied to the Oction E.	2000 0000 100 100 100 100 100 100 100 10	
Adjusted to reflect all prior rate changes.		
*Change in Company's premium level which	will result from application of new rate	es.
Ondrige in Company of premiant to the control of th		
	Continental Insurance Co	mpany
	<del></del>	Name of Company
	J. Spencer Wideman - Ad	<del></del>
		Official – Title

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# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

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FEB 2 3 2007

Change in Company's premium or rate	e level produced by rate revision effective	April 1, 2007
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
<ol> <li>Automobile Physical Damage Private Passenger Commercia</li> </ol>	al	
3. Liability Other Than Auto	\$48,645	+15.3%
Burglary and Theft		
5. Glass		
5. Fidelity 7. Surety	<del></del>	
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners 13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territor	y (territories) or certain classes? If so, specif	by: No
soco ming only apply to certain territor	y (territories) or certain stacces: it so, specifi	.,
	vs rates of an advisory organization, specify	organization): <u>Personal Umbrella</u>
_iability Rate and Rule Revision, 15.3	percent increase.	
'Adjusted to reflect all prior rate chang		
*Change in Company's premium leve	l which will result from application of new rate	es.
	Donos	itors Insurance Company
	Depos	Name of Company
		• •
	Laurie B. Ch	apman, Manager, State Filings
		Official – Title

### DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

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Form (RF-3)

SPRINGFIELD, ILLINOIS

**SUMMARY SHEET** 

Cheryl Nelson, Product Analyst
Official - Title

	Change in Company's premium or rat	e level produced by rate revision effective	<del>241,002</del> 08-01-07
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	\$872,952	4.8%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety	***************************************	
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11. 12.	Inland Marine Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does No	filing only apply to certain territory (to	erritories) or certain classes? If so, specify	:
		s rates of an advisory organization, specify 006-BGL1; revising loss cost multiplier.	organization): Correction
** (	Adjusted to reflect all prior rate change Change in Company's premium level we result from application of new rates.		
		P	ro Pivo & Morino Inc. Co
		Етрі	re Fire & Marine Ins. Co.  Name of Company
			Traile of Company

### SUMMARY SHEET

Change in Company's premium or rat revision effective:	April 2, 2007 NB & RNL	
(1)  Coverage	(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)
33.3.23	<del></del>	
Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
Liability Other Than Auto	606,213_	5.3%_
Burglary and Theft		
5. Glass		
6. Fidelity		<del></del>
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		the state of the s
11. Inland Marine	<del></del>	
12. Homeowners		
13. Commercial Multi-Peril	<del></del>	
14. Crop Hail		**************************************
15. Other	<u> </u>	
Line of Insurance		
Does filing only apply to certain territory (te classes? If so, specify: No	erritories) or certain	
Brief description of filing. (If filing follows ra organization, specify organization): Government Employees Insurance Compa		change for
Personal Umbrella Insurance.		
* Adjusted to reflect all prior rate changes.		
** Change in Company's premium level w	nich will	
result from application of new rates.		
		Government Employees Insurance
		Company
		Name of Company
		<b>.</b> —
		Belinda Thomas
		Official - Title

			RECEIVED		
Form (RF-3) SUMMARY SHEET		EEU Caas			
		FEB - 5 2007			
		y's premium or rate level produced by rate	IDFPH (MPC)		
	revision effective	06/01/07	IDFPH (NIPC) DIVISION OF INSURANCE SPRINGFIELD		
	(1)	(2)	(3)		
	(.)	Statewide Annual	Percent Change		
	Coverage	Premium Volume *	(+ or -)**		
		****			
1.	Automobile Liability				
	Private Passenger	-			
	Commercial				
2.	Automobile Physical Damage				
	Private Passenger				
^	Commercial	#0.074.000	0.00/		
3.	•	\$2,374,308	-9.9%		
4. 5.	Burglary and Theft Glass	· · · · · · · · · · · · · · · · · · ·			
5. 6.	Fidelity	<u></u>			
7.	Surety				
8.	Boiler and Machinery				
9.	Fire				
10.			· · · · · · · · · · · · · · · · · · ·		
11.	Inland Marine				
12.	Homeowners	<u></u>			
13.	Commercial Multi-Peril				
14.	•				
15.	Other				
	Line of Insurance				
D	- filing only conty to cortain torritory	v(s) or certain class(s)? If so, specify:			
Doe	s ming only apply to certain territory	(s) of certain class(s)? If so, specify.			
Brie	f description of filing. (If filing follow	s rates of an advisory organization, specify o	rganization):		
	ption of ISO's Revised General Liab				
	ignation Number: GL-2006-IAL				
	Adjusted to reflect all prior rate chan		20		
C	nange in Company's premium leve	I which will result from application of new rate	75.		
	GRANITE ST	ATE INSURANCE COMPANY			
	0.020	Name of Company			
		•			
		Dorothy L. Todd, Senior Filing Analyst			
	Official - Title				

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FEB 1 4 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

#### SUMMARY SHEET

Change in Company's premium revision effective July 1,	n or rate level produced 2007	by rate ·
(1)	(2)	(3)
<u>Coverage</u>	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	7,121,151	+0.3%
4. Burglary and Theft 5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery 9. Fire		
10. Extended Coverage	·	
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril 14. Crop Hail		
15. Other Line of Insurance	-	
Does filing only apply to certain If so, specify:	territory (territories)o	r certain classes?
Brief description of filing. (If organization, specify organization	filing follows rates of ): This filing is to a	an advisory dopt the ISO increased
limits factors filing GL-2006-IALI	and ELP filing GL-2005	-RELP1 without
deviation.		
<del></del>		
* Adjusted to reflect all prior r  ** Change in Company's premium lev result from application of new	el which will	
	Grinnell Mutual Reinsu	rance Company
	Name of Comp	any
	Karen Bethea - A	ctuary
	Official - Ti	

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Form (RF-3)		SUMMARY SHEET	RECEIVED		
	Change in Compan revision effective	ny's premium or rate level produced by rate 06/01/07	FEB - 5 2007		
	(1) Coverage	(2) Statewide Annual Premium Volume *	IDFPH (MPC) DIVISION OF INSURANCE SPRINGFIELD  (3) Percent Change (+ or -)**		
2. Auto P C 3. Liab 4. Burg 5. Glas 6. Fide 7. Sure 8. Boile 9. Fire 10. Exte 11. Inlar 12. Hom 13. Com 14. Crop 15. Other	omobile Liability rivate Passenger commercial comobile Physical Damage rivate Passenger commercial collity Other Than Auto glary and Theft as elity er and Machinery ended Coverage and Marine neowners mercial Multi-Peril o Hail er Line of Insurance	\$1,835,871  \$1,835,871  (s) or certain class(s)? If so, specify:	-9.9%		
Adoption	, • • •	vs rates of an advisory organization, specify or bility Increased Limits Factors. L1	ganization):		
	ted to reflect all prior rate char se in Company's premium leve	nges. el which will result from application of new rates	3.		
	ILLINOIS NAT	TIONAL INSURANCE COMPANY  Name of Company			
	Dorothy L. Todd, Senior Filing Analyst  Official - Title				

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Form (RF-3)	SUMMAI	RY SHEET	FEB - 5 2007
	inge in Company's premium or significant in the company of the com		DEPR (MPC) DIVISION OF INSURANCE SPRINGFIELD
(1) Cove	rage	(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
1. Automobile Liabilit Private Passeng Commercial 2. Automobile Physic Private Passeng Commercial 3. Liability Other That 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machine 9. Fire 10. Extended Coverag 11. Inland Marine 12. Homeowners 13. Commercial Multi-14. Crop Hail 15. Other  Line of Insu	al Damage ger n Auto ery e	\$125	-9.9%
Brief description of filing	certain territory(s) or certain cla . (If filing follows rates of an ad ed General Liability Increased L GL-2006-IALL1	visory organization, specify o	organization):
* Adjusted to reflect al ** Change in Company'	s premium level which will result the INSURANCE CO. OF THE Nam		

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IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3) **SUMMARY SHEET** 

(	Change in Company's premium or rate	level produced by rate revision effect	tive 6/1/07
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial	<del></del>	
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	23,729	+12%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
riefo	description of filing. (If filing follows	ritories) or certain classes? If so, spe rates of an advisory organization, spe er GL-2006-BGL1 & GL-2006-IALL	cify organization):
k Cl	djusted to reflect all prior rate changes nange in Company's premium level who sult from application of new rates.		
		N	ational Fire and Indemnity
			The state of the s
			xchange  Name of Company
			rame of company
		Α	nn Hawkins, Vice President,
			ttorney-in-Fact
		<del></del>	Official - Title

### ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/2007 (2) (3) (1)**Annual Premium** Percent Volume (Illinois)\* Change (+ or -)\*\* Coverage Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto 3. 4,446,852 -1.32% 4. **Burglary and Theft** 5. Glass 6. Fidelity 7. Surety Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies only to policies that fall within specific Technology Program Class Codes as indicated on the filed Rate Page. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): CNA is filing a deviation to be applied to the General Liability Loss Costs for Technology Program policies. \*Adjusted to reflect all prior rate changes. \*\*Change in Company's premium level which will result from application of new rates. National Fire Insurance Company of Hartford Name of Company J. Spencer Wideman - Actuarial Consultant

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Official - Title

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Form (RF-3)		SUMMARY SHEET	RECEIVED		
	Change in Company revision effective	y's premium or rate level produced by rate 06/01/07	FEB - 5 2007  IDFPR (MPC)  DIVISION OF INSURANCE  SPRINGFIELD		
	(1) Coverage	(2) Statewide Annual Premium Volume *	(3) Percent Change(+ or -)**		
1. 2.	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger				
3. 4. 5. 6.	Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity	\$9,644,131	-9.9%		
7. 8. 9. 10.	Surety Boiler and Machinery Fire Extended Coverage				
11. 12. 13. 14. 15.	Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other				
Line of Insurance  Does filing only apply to certain territory(s) or certain class(s)? If so, specify:					
Brief description of filing. (If filing follows rates of an advisory organization, specify organization):  Adoption of ISO's Revised General Liability Increased Limits Factors.  Designation Number: GL-2006-IALL1					
* Adjusted to reflect all prior rate changes.  ** Change in Company's premium level which will result from application of new rates.					
NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA					

Dorothy L. Todd, Senior Filing Analyst
Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

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FEB 2 3 2007

Change in Company's premium or rate leve	el produced by rate revision effective	April 1, 2007
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Liability Other Than Auto	\$127	+18.1%
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
Boiler and Machinery		
9. Fire		
10. Extended Coverage		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		· · · · · · · · · · · · · · · · · · ·
15. Other		
cine of insurance		
Does filing only apply to certain territory (te	rritories) or certain classes? If so, specify	z: No
2000 ming only apply to contain termony (to	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Brief description of filing. (If filing follows ra		organization): Personal Umbrella
Liability Rate and Rule Revision, 18.1 perc	ent increase.	
*Adjusted to reflect all prior rate changes		
**Change in Company's premium level whi	ch will result from application of new rate	<b>S</b> .
	<b></b>	
	Nationwide	Mutual Insurance Company Name of Company
		Name of Company
	Laurie R. Cha	apman, Manager, State Filings
	Laurie B. One	Official - Title

Form (RF-3)	SUMMARY SHEET	RECEIVED
Change in Company revision effective	r's premium or rate level produced by rate 06/01/07	FEB - 5 2007  IDFPR (MPC)  DIVISION OF INSURANCE SPRINGFIELD
(1)	(2) Statewide Annual	(3) Percent Change
_Coverage	Premium Volume *	(+ or -)**
<ol> <li>Automobile Liability         <ul> <li>Private Passenger</li> <li>Commercial</li> </ul> </li> <li>Automobile Physical Damage         <ul> <li>Private Passenger</li> </ul> </li> </ol>		
Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other  Line of Insurance  Does filing only apply to certain territory(see the content of the content of the certain territory(see the content of the certain territory(see the certain	\$904,460	-9.9%
Brief description of filing. (If filing follows Adoption of ISO's Revised General Liabi Designation Number: GL-2006-IALL		y organization):
* Adjusted to reflect all prior rate chang ** Change in Company's premium level	ges. which will result from application of new re	ates.
NEW HAMPSH	IIRE INSURANCE COMPANY	
	Name of Company  Dorothy L. Todd, Senior Filing Analyst	

Official - Title

#### SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision

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FEB 2 6 2007

	effective:	5/1/2007	_	
	(1)		(2) Annual Premium	(3) Percent
	<u>Coverage</u>		Volume (Illinois)	Change (+ or -) XX
1.	Automobile Liabi	lity		
	Private Pas	ssenger		
	Commercia			<del></del>
2.	Automobile Phys	sical Damage		
	Private Pas			
	Commercia			
3.	Liability Other Th		637,010	-20.0%
4.	Burglary and The	eft		
5.	Glass			<del></del>
6.	Fidelity			
7.	Surety			
8.	Boiler and Mach	•		
9.	Fire (& Allied Lir			
10.	Extended Cover	<del>-</del>		<del></del>
11.	Inland Marine (C	ommercial)		***************************************
12.	Homeowners			
13.	Commercial Mul	ti-Peril		
14.	Crop Hail			
15.	Other			
	Line o	of Insurance		
_				
	- • • • •	•	or certain classes? If so,	
specif	y: Technology Prop	orietary GL Prem/Ops clas	ss codes (9AACA, 9AACB, 9AACC, 9A	ACD, 9AACE,
	9AACF, 9AACG	, 9AACH, 9AACJ, 9AACL,	, 9AACM)	
Brief o	lescription of filing.	(If filing follows rates of an	advisory organization, specify organiz	ration):
		· Technology Proprietary Cl		,
	GL Fremiops -	recillology Proprietary Ci	ass Codes	
* /	Adjusted to reflect a	Il prior rate changes.		
		y's premium level which w	ill	
	esult from applicati			
	.,			
			St. Paul Fire & Marine Insurance Co	mpany
			Name of Compa	
			·	•
			Susan Boettcher -Regula	tory Analyst
			Official - Title	

#### SUMMARY SHEET

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FEB 2 6 2007

	Change in Company's premium or rate leve effective: 5/1/2007	el produced by rate revision	
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)	Change (+ or -) XX
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	124,710	-20.0%
4.	Burglary and Theft	<del></del>	
5.	Glass		
6.	Fidelity		
7.	Surety	<del></del>	
8.	Boiler and Machinery	<del></del>	
9.	Fire (& Allied Lines)		
10.	Extended Coverage		
11.	Inland Marine (Commercial)		
12.	Homeowners		<del></del>
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
13.	Line of Insurance		
	Ente of madranee		
Does f	iling only apply to certain territory (territories)	or certain classes? If so,	
specify	r: Technology Proprietary GL Prem/Ops class	s codes (9AACA, 9AACB, 9AACC, 9A	ACD, 9AACE,
	9AACF, 9AACG, 9AACH, 9AACJ, 9AACL,	9AACM)	
Brief d	escription of filing. (If filing follows rates of an	advisory organization, specify organiz	ation):
			·
	GL Prem/Ops - Technology Proprietary Cla	iss codes	
		<del> </del>	
	Adjusted to reflect all prior rate changes.		
	Change in Company's premium level which wil	1	
r	esult from application of new rates.		
		St. Paul Mercury Insurance	e Company
		Name of Compa	ny
		Cupp Doottohar Danida	ton, Anglyst
		Susan Boettcher - Regula Official - Title	itory Arialyst
		Oniciai - Title	

### Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

FEB 2 6 2007

SPRINGFIELD, ILLINOIS

(1)	(2)	(3)
	Annual Premium	Percent
Coverage	Volume (Illinois)*	Change (+ or -)*
Automobile Liability Private		
Passenger		0.00%
Commercial		0.00%
Automobile Physical Damage		
Private Passenger		0.00%
Commercial		0.00%
Liability Other Than Auto	148,428	3.00%
Burglary and Theft		0.00%
Glass		0.00%
Fidelity		0.00%
Surety		0.00%
Boiler and Machinery		0.00%
Fire		0.00%
Extended Coverage		0.00%
Inland Marine	<del></del>	0.00%
Homeowners		0.00%
Commercial Multi-Peril		0.00%
Crop Hail	<del></del>	0.00%
Other	<del></del>	0.00%
Life of Insurance		0.0070
	ain territory (territo	ries) or certain
Does filing only apply to cert classes? If so, specify: NA  Brief description of filing. organization, specify organiza	(If filing follows rat	, "Number of Employees", in the mo
Brief description of filing. organization, specify organiza At the same time, we eliminated "Number of Members"	(If filing follows rat Ltion): We added a new variable , as this variable is highly correlated with "	, "Number of Employees", in the mo
Brief description of filing. organization, specify organiza	(If filing follows rat Ltion): We added a new variable , as this variable is highly correlated with "	, "Number of Employees", in the mo
Brief description of filing. organization, specify organiza	(If filing follows rat ution): We added a new variable as this variable is highly correlated with "	, "Number of Employees", in the mo Gross Revenues". Also, the structure
Brief description of filing. organization, specify organiza At the same time, we eliminated "Number of Members" the formula used in calculating the rates has changed  *Adjusted to reflect all pric **Change in Company's premium	(If filing follows rat ution): We added a new variable as this variable is highly correlated with "	"Number of Employees", in the mo Gross Revenues". Also, the structure t from application

**Actuarial Assistant** 

Official -- Title

MAR 1 7 1983

### ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/2007 (3) (1)(2) Percent **Annual Premium** Change (+ or -)\*\* Volume (Illinois)\* Coverage Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 1,155,023 -1.43% 3. Liability Other Than Auto Burglary and Theft 4. 5. Glass Fidelity 6. 7. Surety **Boiler and Machinery** 8. 9. 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies only to policies that fall within specific Technology Program Class Codes as indicated on the filed Rate Page. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): CNA is filing a deviation to be applied to the General Liability Loss Costs for Technology Program policies. \*Adjusted to reflect all prior rate changes. \*\*Change in Company's premium level which will result from application of new rates.

Transportation Insurance Company

Name of Company

J. Spencer Wideman - Actuarial Consultant

Official - Title

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FEB 1 4 2007

# DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

FEB 0 5 2007

Form (RF-3)

### **SUMMARY SHEET**

Actuarial Filing ID No.: R-IL-NDO-331 1/4/2007

SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision effective		
Change in Company's premium or rate level produced by rate revision effective		
Langue in Campany's membrial of the level bloubled by fale levision checure		

	SPRINGF	TIELD, ILLINOIS	ı	$\alpha / \beta$
	Change in Company's premium of	or rate level produced by	rate revision effective	3/1/07
	(1) <u>Coverage</u>	Annual	2) Premium (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		<del></del>	
2.	Automobile Physical Damage Private Passenger Commercial			correction
3.	Liability Other Than Auto	CY 2005 EP: 5	\$1,256,958	+.02%
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity	······································		
7.	Surety	<u> </u>		
8.	Boiler and Machinery	····		
9.	Fire			
10.	Extended Coverage		<u> </u>	
11.	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Peril			
14.	Crop Hail	<del></del>		
15.	Other			
	Line of Insurance			
Filin	filing only apply to certain territo g will only have a rate impact on cyholders affected)			perience dr/cr. (12 out of 854
	description of filing. (If filing fog to clarify the rating algorithms			organization):
** C	djusted to reflect all prior rate change in Company's premium lesult from application of new rate	vel which will		
			United Coom	States Liability Insurance pany Name of Company
			Patrici	a E. Ivey, Asst. Actuary

### ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/2007 (3) (1)(2) Percent **Annual Premium** Change (+ or -)\*\* Volume (Illinois)\* Coverage Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial 2,986,897 -0.46% 3. Liability Other Than Auto Burglary and Theft Glass 5. 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies only to policies that fall within specific Technology Program Class Codes as indicated on the filed Rate Page. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): CNA is filing a deviation to be applied to the General Liability Loss Costs for Technology Program policies.

Vailey Forge Insurance Company

Name of Company

J. Spencer Wideman - Actuarial Consultant

Official - Title

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FEB 1 4 2007

<sup>\*</sup>Adjusted to reflect all prior rate changes.

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.